

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: VENTILATOR AND METHODS FOR TREATING
HEAD TRAUMA

Attorney Docket Number:: 016354-005211US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 11

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Keith
Middle Name:: G.
Family Name:: Lurie
Name Suffix::
City of Residence:: Minneapolis
State or Province of Residence:: MN
Country of Residence:: US
Street of Mailing Address:: 4751 Girard Avenue South
City of Mailing Address:: Minneapolis
State or Province of mailing address:: MN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 55409

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/460,558	06/11/03
10/460,558	Continuation-in-part of	10/426,161	04/28/03

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: Advanced Circulatory Systems, Inc.
Street of mailing address:: 7615 Golden Triangle Drive, Suite A, Technology
Park #5
City of mailing address:: Minneapolis
State or Province of mailing address:: MN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 55344